

Waiver Questionnaire - Technical Evaluation (Invention Waiver)

Title of Invention		
NASA Case No.	Contract No.	Waiver No. W-
		has petitioned NASA for waiver of below will be helpful to the NASA Inventions and as to whether the petition should be granted or
Please complete Part I, below,	and return this evaluation to the Patent (Counsel/Advisor, Mail Stop,
not later than		
	Date) PART I	
1. Briefly describe the invention	1.	
2. To what specific program is	the invention related? Discuss in terms o	of mission or objectives.
3. Is the invention related to a late. Yes (Briefly explain below)	NASA Technology Utilization sponsored to w) b. No	technology applications project?

4.	If contract funds were provided by any Government agency(ies) other than NASA, identify the agency(ies) and the name (and telephone number) of a person from such agency(ies) who is familiar with the work of the invention.
5.	Please comment to the best of your knowledge if the Contractor is not located in the U.S., or does not have a place of business in the U.S., or is subject to the control of a foreign government.
6.	Other comments.
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	chnical Evaluator/Title (Please Print) (Date)
FT	S Telephone No.

PART II (To be completed by Patent Counsel/Advisor)

1.	f contract funds from a Government agency(ies) other than NASA are to be provided (See Question 4, Part I) has such agency(ies) recommended or made justification for denial for the waiver?			
	Yes (Explain and identify the name and telephone number of the person(s) contacted from such other b. No			
2.	The waiver should be:			
	a. Granted b. Denied (If denial is recommended, explain below)			
3.	Other comments.			
Pa	ent Counsel/Advisor (Please Print) (Date)			

NOTE.-Attach invention disclosure to this questionnaire and forward to the ICB.